

# Work Order ID 98394

**\*98394\***

Page 1

March-12-13 1:53:54 PM

Item ID: D3166-1

Accept

**\*N900040100\***

Setup Start **\*NS1\***

Revision ID:

Stop **\*NS2\***

Item Name: Basket Hoop

Start Date: 3/11/13 Start Qty: 20.00

**\*20\***

Cust Item ID:

Required Date: 3/20/13 Req'd Qty: 20.00

**\*20\***

Customer:

Reference:

Approvals:

Process Plan: MLJ

Date: 13-03-14

Tooling:

Date:

Run Start **\*NR1\***

QC:

Date:

SPC (Y/N):

Date:

Stop **\*NR2\***

| Sequence ID/<br>Work Center ID | Operation<br>Description | Set Up/<br>Run Hours | Tool ID | Tool # | Plan<br>Code | Accept<br>Qty | Reject<br>Qty | Reject<br>Number | Insp.<br>Stamp |
|--------------------------------|--------------------------|----------------------|---------|--------|--------------|---------------|---------------|------------------|----------------|
|--------------------------------|--------------------------|----------------------|---------|--------|--------------|---------------|---------------|------------------|----------------|

Draw Nbr

Revision Nbr

D3166

Rev A1

100

0.00

**\*100\***

Skidtubes

Large Fab

Memo

0.00

Large Fab

Cut 3/4" x 3/4" square tubing 60.00" long.

(11) CC 13-5-8

110

0.00

**\*110\***

BENDING MACHINE - SKIDTUBES

CNC Bend 1

Memo

0.00

CNC Delta 100 Bender

Form D3166-1 Basket Hoop as per Dwg D3166 using Bending program 350 BASB, and folio 18.

(11) SAD 13-05-23

120

QC6- Inspect dimensions to drawing

0.00

**\*120\***

QC

Memo

0.00

Quality Control

Inspect Basket Hoop dimensions with template D3166-1-T1 (DT8302)

(11) 13-05-23 DAS 09 9-09

NCR: Yes / No

**WORK ORDER NON-CONFORMANCE / UPDATE**

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

|  |      |      |     |   |                   |   |             |              |              |  |  |
|--|------|------|-----|---|-------------------|---|-------------|--------------|--------------|--|--|
| Work Order: _____<br><br>Part No. _____<br><br>NCR No. _____ |      |      |     | <b>DISPOSITION</b><br><br>Rework <input type="checkbox"/><br>Scrap <input type="checkbox"/><br>Use-as-is <input type="checkbox"/><br>Work Order Update <input type="checkbox"/> |                   | <b>AGAINST DEPARTMENT/PROCESS</b><br><br><div style="display: flex; justify-content: space-between;"> <div>           Skid-tube <input type="checkbox"/><br/>           Machining <input type="checkbox"/><br/>           Thermoforming <input type="checkbox"/><br/>           Large Fab <input type="checkbox"/> </div> <div>           Crosstube <input type="checkbox"/><br/>           Small Fab <input type="checkbox"/><br/>           Finishing <input type="checkbox"/><br/>           Composite <input type="checkbox"/> </div> <div>           Water Jet <input type="checkbox"/><br/>           Prod. Eng. Coord. <input type="checkbox"/><br/>           Rec/Store/Packaging <input type="checkbox"/><br/>           Supplier <input type="checkbox"/> </div> <div>           Engineering <input type="checkbox"/><br/>           Quality <input type="checkbox"/><br/>           Other <input type="checkbox"/> </div> </div> |             |              |              |  |  |
| <b>Root Cause</b>  | Date | Step | Qty | Description of work order update or Non-conformance   | Initial Chief Eng | Action Description  | Sign & Date | Verification | QC Inspector |  |  |
| Doc/Data <input type="checkbox"/>                            |      |      |     |   |                   |   |             |              |              |  |  |
| Equip/Tooling <input type="checkbox"/>                       |      |      |     |   |                   |   |             |              |              |  |  |
| Operator <input type="checkbox"/>                            |      |      |     |   |                   |   |             |              |              |  |  |
| Material <input type="checkbox"/>                            |      |      |     |   |                   |   |             |              |              |  |  |
| Setup <input type="checkbox"/>                               |      |      |     |   |                   |   |             |              |              |  |  |
| Other <input type="checkbox"/>                               |      |      |     |   |                   |   |             |              |              |  |  |
| Process <input type="checkbox"/>                             |      |      |     |   |                   |   |             |              |              |  |  |
| Supplier <input type="checkbox"/>                            |      |      |     |   |                   |   |             |              |              |  |  |
| Training <input type="checkbox"/>                            |      |      |     |   |                   |   |             |              |              |  |  |
| Unapproved <input type="checkbox"/>                          |      |      |     |   |                   |   |             |              |              |  |  |

| FAULT CATEGORY   |   |   |  |   |
|--|---|---|--|---|
| <b>Landing Gear</b><br><input type="checkbox"/> Bending<br><input type="checkbox"/> Centre Not Concentric to O/S<br><input type="checkbox"/> Cracks<br><input type="checkbox"/> Crushed/Crimped.<br><input type="checkbox"/> Cuffs<br><input type="checkbox"/> Heat Treat<br><input type="checkbox"/> Inspection Strip in Tube<br><input type="checkbox"/> Ripples in Bend<br><input type="checkbox"/> Torque Waves in Extrusion<br><input type="checkbox"/> Turning Sequence<br><input type="checkbox"/> Wave/Twist in Tube | <b>General</b><br><input type="checkbox"/> Bend<br><input type="checkbox"/> BOM/Route<br><input type="checkbox"/> Broken/Damaged<br><input type="checkbox"/> Burrs<br><input type="checkbox"/> Contamination<br><input type="checkbox"/> Countersink<br><input type="checkbox"/> Cut Too Short<br><input type="checkbox"/> Drill Holes<br><input type="checkbox"/> Drawing<br><input type="checkbox"/> Finish<br><input type="checkbox"/> Folio | <input type="checkbox"/> Grain<br><input type="checkbox"/> Hardware<br><input type="checkbox"/> Inspection Incomplete<br><input type="checkbox"/> Instructions Incomplete/Unclear<br><input type="checkbox"/> Maintenance<br><input type="checkbox"/> Mislabeled<br><input type="checkbox"/> Misread<br><input type="checkbox"/> Offset<br><input type="checkbox"/> Out of Calibration<br><input type="checkbox"/> Out of Sequence<br><input type="checkbox"/> Outside Dimensions | <input type="checkbox"/> Ovalized<br><input type="checkbox"/> Over/Under tolerance<br><input type="checkbox"/> Part Incorrect<br><input type="checkbox"/> Part Lost/Missing<br><input type="checkbox"/> Part Moved<br><input type="checkbox"/> Positioned Wrong<br><input type="checkbox"/> Power Loss/Surge | <input type="checkbox"/> Pressure/Forced<br><input type="checkbox"/> Temperature/Cure<br><input type="checkbox"/> Weld<br><input type="checkbox"/> Wrong Stock Pulled<br><br><input type="checkbox"/> Other |

# Work Order ID 98394

**\*98394\***

Page 2

March-12-13 1:53:54 PM

Item ID: D3166-1

Accept

**\*N900040100\***

Setup Start

**\*NS1\***

Revision ID:

Stop

**\*NS2\***

Item Name: Basket Hoop

Start Date: 3/11/13

Start Qty: 20.00

**\*20\***

Cust Item ID:

Required Date: 3/20/13

Req'd Qty: 20.00

**\*20\***

Customer:

Reference:

Approvals:

Process Plan:

Date:

Tooling:

Date:

QC:

Date:

SPC (Y/N):

Date:

Run Start

**\*NR1\***

Stop

**\*NR2\***

Sequence ID/  
Work Center ID

Operation  
Description

Set Up/  
Run Hours

Tool ID

Tool #

Plan  
Code

Accept  
Qty

Reject  
Qty

Reject  
Number

Insp.  
Stamp

130

Identify as per dwg & Stock Location: W A 2004

0.00

**\*130\***

Packaging

Memo

0.00

Packaging

(15)

13-05-23

PD

140

QC21- Final Inspection - Work Order Release

0.00

**\*140\***

QC

Memo

0.00

Quality Control

13/5/27

RB-24

NCR: Yes / No

**WORK ORDER NON-CONFORMANCE / UPDATE**

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

|  |             |             |            |   |                          |   |                        |                     |                     |  |  |
|--|-------------|-------------|------------|---|--------------------------|---|------------------------|---------------------|---------------------|--|--|
| Work Order: _____<br><br>Part No. _____<br><br>NCR No. _____ |             |             |            | <b>DISPOSITION</b><br><br>Rework <input type="checkbox"/><br>Scrap <input type="checkbox"/><br>Use-as-is <input type="checkbox"/><br>Work Order Update <input type="checkbox"/> |                          | <b>AGAINST DEPARTMENT/PROCESS</b><br><br><div style="display: flex; justify-content: space-between;"> <div>           Skid-tube <input type="checkbox"/><br/>           Machining <input type="checkbox"/><br/>           Thermoforming <input type="checkbox"/><br/>           Large Fab <input type="checkbox"/> </div> <div>           Crosstube <input type="checkbox"/><br/>           Small Fab <input type="checkbox"/><br/>           Finishing <input type="checkbox"/><br/>           Composite <input type="checkbox"/> </div> <div>           Water Jet <input type="checkbox"/><br/>           Prod. Eng. Coord. <input type="checkbox"/><br/>           Rec/Store/Packaging <input type="checkbox"/><br/>           Supplier <input type="checkbox"/> </div> <div>           Engineering <input type="checkbox"/><br/>           Quality <input type="checkbox"/><br/>           Other <input type="checkbox"/> </div> </div> |                        |                     |                     |  |  |
| <b>Root Cause</b>  | <b>Date</b> | <b>Step</b> | <b>Qty</b> | <b>Description of work order update or Non-conformance</b>  | <b>Initial Chief Eng</b> | <b>Action Description</b>   | <b>Sign &amp; Date</b> | <b>Verification</b> | <b>QC Inspector</b> |  |  |
| Doc/Data <input type="checkbox"/>                            |             |             |            |   |                          |   |                        |                     |                     |  |  |
| Equip/Tooling <input type="checkbox"/>                       |             |             |            |   |                          |   |                        |                     |                     |  |  |
| Operator <input type="checkbox"/>                            |             |             |            |   |                          |   |                        |                     |                     |  |  |
| Material <input type="checkbox"/>                            |             |             |            |   |                          |   |                        |                     |                     |  |  |
| Setup <input type="checkbox"/>                               |             |             |            |   |                          |   |                        |                     |                     |  |  |
| Other <input type="checkbox"/>                               |             |             |            |   |                          |   |                        |                     |                     |  |  |
| Process <input type="checkbox"/>                             |             |             |            |   |                          |   |                        |                     |                     |  |  |
| Supplier <input type="checkbox"/>                            |             |             |            |   |                          |   |                        |                     |                     |  |  |
| Training <input type="checkbox"/>                            |             |             |            |   |                          |   |                        |                     |                     |  |  |
| Unapproved <input type="checkbox"/>                          |             |             |            |   |                          |   |                        |                     |                     |  |  |

| FAULT CATEGORY   |   |   |   |  |
|--|---|---|---|--|
| <b>Landing Gear</b><br><input type="checkbox"/> Bending<br><input type="checkbox"/> Centre Not Concentric to O/S<br><input type="checkbox"/> Cracks<br><input type="checkbox"/> Crushed/Crimped.<br><input type="checkbox"/> Cuffs<br><input type="checkbox"/> Heat Treat<br><input type="checkbox"/> Inspection Strip in Tube<br><input type="checkbox"/> Ripples in Bend<br><input type="checkbox"/> Torque Waves in Extrusion<br><input type="checkbox"/> Turning Sequence<br><input type="checkbox"/> Wave/Twist in Tube | <b>General</b><br><input type="checkbox"/> Bend<br><input type="checkbox"/> BOM/Route<br><input type="checkbox"/> Broken/Damaged<br><input type="checkbox"/> Burrs<br><input type="checkbox"/> Contamination<br><input type="checkbox"/> Countersink<br><input type="checkbox"/> Cut Too Short<br><input type="checkbox"/> Drill Holes<br><input type="checkbox"/> Drawing<br><input type="checkbox"/> Finish<br><input type="checkbox"/> Folio | <input type="checkbox"/> Grain<br><input type="checkbox"/> Hardware<br><input type="checkbox"/> Inspection Incomplete<br><input type="checkbox"/> Instructions Incomplete/Unclear<br><input type="checkbox"/> Maintenance<br><input type="checkbox"/> Mislabeled<br><input type="checkbox"/> Misread<br><input type="checkbox"/> Offset<br><input type="checkbox"/> Out of Calibration<br><input type="checkbox"/> Out of Sequence<br><input type="checkbox"/> Outside Dimensions | <input type="checkbox"/> Ovalized<br><input type="checkbox"/> Over/Under tolerance<br><input type="checkbox"/> Part Incorrect<br><input type="checkbox"/> Part Lost/Missing<br><input type="checkbox"/> Part Moved<br><input type="checkbox"/> Positioned Wrong<br><input type="checkbox"/> Power Loss/Surge<br><br><input type="checkbox"/> Pressure/Forced<br><input type="checkbox"/> Temperature/Cure<br><input type="checkbox"/> Weld<br><input type="checkbox"/> Wrong Stock Pulled<br><br><input type="checkbox"/> Other |  |

# Picklist Print

March-12-13 1:53:54 PM

Page 1

Work Order ID: 98394

Parent Item: D3166-1

Parent Item Name: Basket Hoop

Start Date: 3/11/13

Required Date: 3/20/13

Start Qty: 20.00

Required Qty: 20.00

Comments: IPP A02.08.23New issueKJ  
IPP: B 08.12.05 Updated bending program on step 3 per NCR W/O43165 KJ Verified by: EC  
IPP Rev:C 09-01-23 as per DEO D3166-A2 DD verified by:EC

| Component Item ID/<br>Item Name               | Replacement<br>Item ID | Mfg/<br>Purch | Bin<br>Item | Primary<br>Location | Last<br>Location | Route<br>Seq ID | Unit of<br>Measure | Qty on<br>Hand | Qty per Kit | Total<br>Qty | Qty<br>Issued | Date<br>Issued | Status |
|---|------------------------|---------------|-------------|---------------------|------------------|-----------------|--------------------|----------------|-------------|--------------|---------------|----------------|--------|
| M304TS0.750W.065<br>304 SQ Tube .75x.75x.065W |                        | Purchased     | No          |                     |                  | 100             | f                  | 1,535.8379     | 5           | 105.26316    |               | 13-05-05       |        |

| Location | Loc Qty    | Loc Code |
|----------|------------|----------|
| MAT017   | 558.7846   |          |
| 124069   | 558.7846   |          |
| WA006    | 977.053297 |          |
| 123303   | 377.053297 |          |
| 124880   | 600        |          |

52.6316

NCR: Yes / No

**WORK ORDER NON-CONFORMANCE / UPDATE**

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

|  |   |   |                                      |                                    |                                    |                                      |                                    |                                    |  |                                  |  |                                    |  |                                |                                    |                                    |                                   |  |
|--|---|---|--------------------------------------|------------------------------------|------------------------------------|--------------------------------------|------------------------------------|------------------------------------|--|----------------------------------|--|------------------------------------|--|--------------------------------|------------------------------------|------------------------------------|-----------------------------------|--|
| Work Order: _____<br><br>Part No. _____<br><br>NCR No. _____ | <b>DISPOSITION</b><br><br>Rework <input type="checkbox"/><br>Scrap <input type="checkbox"/><br>Use-as-is <input type="checkbox"/><br>Work Order Update <input type="checkbox"/> | <b>AGAINST DEPARTMENT/PROCESS</b><br><br><table style="width: 100%;"> <tr> <td>Skid-tube <input type="checkbox"/></td> <td>Crosstube <input type="checkbox"/></td> <td>Water Jet <input type="checkbox"/></td> <td>Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table> | Skid-tube <input type="checkbox"/>   | Crosstube <input type="checkbox"/> | Water Jet <input type="checkbox"/> | Engineering <input type="checkbox"/> | Machining <input type="checkbox"/> | Small Fab <input type="checkbox"/> | Prod. Eng. Coord. <input type="checkbox"/> | Quality <input type="checkbox"/> | Thermoforming <input type="checkbox"/> | Finishing <input type="checkbox"/> | Rec/Store/Packaging <input type="checkbox"/> | Other <input type="checkbox"/> | Large Fab <input type="checkbox"/> | Composite <input type="checkbox"/> | Supplier <input type="checkbox"/> |  |
| Skid-tube <input type="checkbox"/>                           | Crosstube <input type="checkbox"/>  | Water Jet <input type="checkbox"/>  | Engineering <input type="checkbox"/> |                                    |                                    |                                      |                                    |                                    |  |                                  |  |                                    |  |                                |                                    |                                    |                                   |  |
| Machining <input type="checkbox"/>                           | Small Fab <input type="checkbox"/>  | Prod. Eng. Coord. <input type="checkbox"/>  | Quality <input type="checkbox"/>     |                                    |                                    |                                      |                                    |                                    |  |                                  |  |                                    |  |                                |                                    |                                    |                                   |  |
| Thermoforming <input type="checkbox"/>                       | Finishing <input type="checkbox"/>  | Rec/Store/Packaging <input type="checkbox"/>  | Other <input type="checkbox"/>       |                                    |                                    |                                      |                                    |                                    |  |                                  |  |                                    |  |                                |                                    |                                    |                                   |  |
| Large Fab <input type="checkbox"/>                           | Composite <input type="checkbox"/>  | Supplier <input type="checkbox"/>   |                                      |                                    |                                    |                                      |                                    |                                    |  |                                  |  |                                    |  |                                |                                    |                                    |                                   |  |

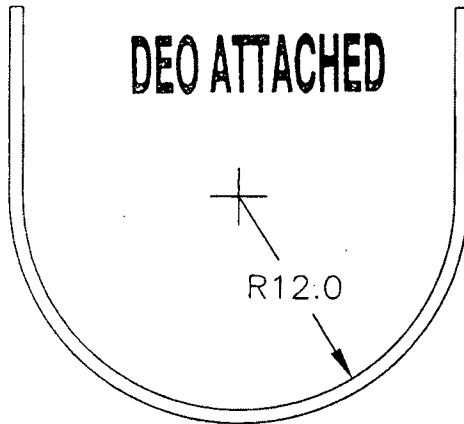
| Root Cause    | Date | Step | Qty | Description of work order update or Non-conformance | Initial Chief Eng | Action Description | Sign & Date | Verification | QC Inspector |
|---------------|------|------|-----|---|-------------------|--------------------|-------------|--------------|--------------|
| Doc/Data      |      |      |     |   |                   |                    |             |              |              |
| Equip/Tooling |      |      |     |   |                   |                    |             |              |              |
| Operator      |      |      |     |   |                   |                    |             |              |              |
| Material      |      |      |     |   |                   |                    |             |              |              |
| Setup         |      |      |     |   |                   |                    |             |              |              |
| Other         |      |      |     |   |                   |                    |             |              |              |
| Process       |      |      |     |   |                   |                    |             |              |              |
| Supplier      |      |      |     |   |                   |                    |             |              |              |
| Training      |      |      |     |   |                   |                    |             |              |              |
| Unapproved    |      |      |     |   |                   |                    |             |              |              |

**FAULT CATEGORY**

| Landing Gear  | General                                 | Other  |
|---|---|--|
| <input type="checkbox"/> Bending                      | <input type="checkbox"/> Bend           | <input type="checkbox"/> Grain                           |
| <input type="checkbox"/> Centre Not Concentric to O/S | <input type="checkbox"/> BOM/Route      | <input type="checkbox"/> Hardware                        |
| <input type="checkbox"/> Cracks                       | <input type="checkbox"/> Broken/Damaged | <input type="checkbox"/> Inspection Incomplete           |
| <input type="checkbox"/> Crushed/Crimped              | <input type="checkbox"/> Burrs          | <input type="checkbox"/> Instructions Incomplete/Unclear |
| <input type="checkbox"/> Cuffs                        | <input type="checkbox"/> Contamination  | <input type="checkbox"/> Maintenance                     |
| <input type="checkbox"/> Heat Treat                   | <input type="checkbox"/> Countersink    | <input type="checkbox"/> Mislabeled                      |
| <input type="checkbox"/> Inspection Strip in Tube     | <input type="checkbox"/> Cut Too Short  | <input type="checkbox"/> Misread                         |
| <input type="checkbox"/> Ripples in Bend              | <input type="checkbox"/> Drill Holes    | <input type="checkbox"/> Offset                          |
| <input type="checkbox"/> Torque Waves in Extrusion    | <input type="checkbox"/> Drawing        | <input type="checkbox"/> Out of Calibration              |
| <input type="checkbox"/> Turning Sequence             | <input type="checkbox"/> Finish         | <input type="checkbox"/> Out of Sequence                 |
| <input type="checkbox"/> Wave/Twist in Tube           | <input type="checkbox"/> Folio          | <input type="checkbox"/> Outside Dimensions              |
|   |   | <input type="checkbox"/> Ovalized                        |
|   |   | <input type="checkbox"/> Over/Under tolerance            |
|   |   | <input type="checkbox"/> Part Incorrect                  |
|   |   | <input type="checkbox"/> Part Lost/Missing               |
|   |   | <input type="checkbox"/> Part Moved                      |
|   |   | <input type="checkbox"/> Positioned Wrong                |
|   |   | <input type="checkbox"/> Power Loss/Surge                |
|   |   | <input type="checkbox"/> Pressure/Forced                 |
|   |   | <input type="checkbox"/> Temperature/Cure                |
|   |   | <input type="checkbox"/> Weld                            |
|   |   | <input type="checkbox"/> Wrong Stock Pulled              |
|   |   | <input type="checkbox"/> Other                           |

**DART**

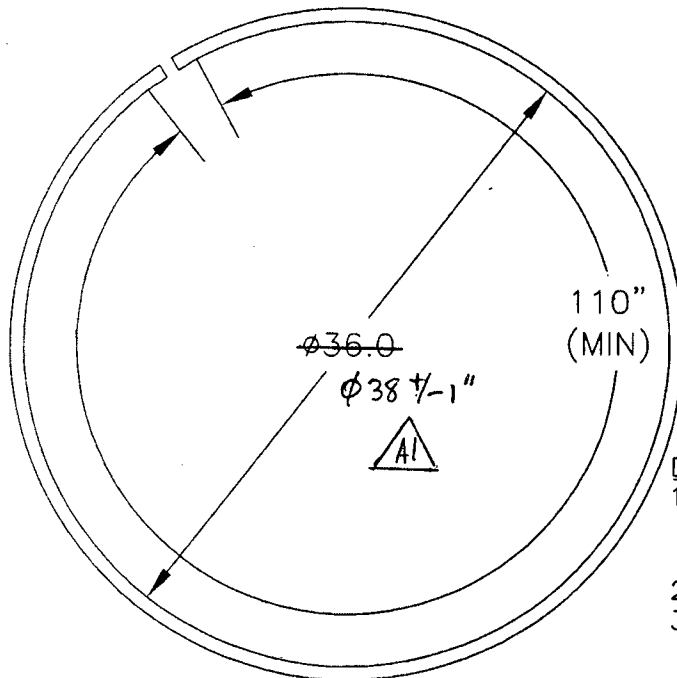
|                  |                |   |                        |
|------------------|----------------|---|------------------------|
| DESIGN<br>#      | DRAWN BY<br>CP | DART AEROSPACE LTD<br>HAWKESBURY, ONTARIO, CANADA |                        |
| CHECKED<br>#     | APPROVED<br>#  | DRAWING NO.<br>D3166                              | REV. A<br>SHEET 1 OF 1 |
| DATE<br>02.07.10 |                | TITLE<br>BASKET HOOP                              | SCALE<br>NTS           |
| A                | 02.07.10       | NEW ISSUE   |                        |
| A1               | 04.04.08       | 38+/- WAS 36.0                                    |                        |

**RELEASED**  
02.08.06**DEO ATTACHED**

10.6 (REF, NEED 8.0 MIN)

**D3166-1 BASKET HOOP**

- 1) MATERIAL: AISI 304/316 SS SQUARE TUBING,  
0.75" x 0.75" x 0.063 WALL, 60.00" LONG  
(REF DART SPEC. M304TS0.750W.063)
- 2) FINISH: NONE
- 3) TOLERANCES ARE PER DART QSI 018 UNLESS  
OTHERWISE NOTED

**D3166-3 BASKET HOOP**

- 1) MATERIAL: AISI 304/316 SS SQUARE TUBING,  
0.75" x 0.75" x 0.063 WALL, 120.00" LONG  
(REF DART SPEC. M304TS0.750W.063)
- 2) FINISH: NONE
- 3) TOLERANCES ARE PER DART QSI 018 UNLESS  
OTHERWISE NOTED

98394 MLS  
13-03-14  
NO. 1110 COPY  
TO  
ELEMENT  
FOR  
13-03-14

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98394

|                      |                      |                  |   |  |                         |                     |              |
|----------------------|----------------------|------------------|---|--|-------------------------|---------------------|--------------|
| DRAWING NO.<br>D3166 | TITLE<br>BASKET HOOP | REV A1           | DART AEROSPACE LTD<br>ENGINEERING ORDER |  | D.E.O. NO.<br>D3166-A-2 | SHEET NO.<br>1 OF 1 | SCALE<br>NTS |
| DRAWN<br>AJS         | CHECKED<br>L         | MFG. APPR.<br>M  | APPROVED<br>MD                          |  | DE APPR.<br>H           |                     |              |
| DATE<br>08.12.11     | DATE<br>08.12.15     | DATE<br>08/12/15 | DATE<br>08/12/16                        |  | DATE<br>08.12.16        |                     |              |

1) MODIFY MATERIAL NOTE FOR D3166-1 AS SHOWN:

IS:

- 1) MATERIAL: AISI 304/316 SS, 3/4 X 3/4 X 0.065 WALL SQUARE TUBING,  
60.00" LONG  
REF. DART SPEC M304TS0.750W.065

WAS:

- 1) MATERIAL: AISI 304/316 SS SQUARE TUBING,  
0.75" x 0.75" x 0.063 WALL, 60.00" LONG  
(REF DART SPEC. M304TS0.750W.063)

2) MODIFY MATERIAL NOTE FOR D3166-3 AS SHOWN:

IS:

- 1) MATERIAL: AISI 304/316 SS, 3/4 X 3/4 X 0.065 WALL SQUARE TUBING,  
120.00" LONG  
REF. DART SPEC M304TS0.750W.065

WAS:

- 1) MATERIAL: AISI 304/316 SS SQUARE TUBING,  
0.75" x 0.75" x 0.063 WALL, 120.00" LONG  
(REF DART SPEC. M304TS0.750W.063)

RELEASED  
08/12/16 MD

REASON: SEE PAR 08-005

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